

Janet T. Mills
Governor

Jeanne M. Lambrew, Ph.D.
Commissioner



Maine Department of Health and Human Services
Licensing and Certification
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COVID-19 Notification Form for a Temporary Increase in Licensed Bed Capacity by a Hospital

Pursuant to Governor Janet T. Mills' Executive Order of March 15, 2020, the Director of the Division of Licensing and Certification (DLC) has authorized Maine hospitals, licensed by the Department of Health and Human Services under chapter 401, to submit notification of a temporary increase in licensed bed capacity or temporary suspension of services to DLC rather than file a COVID-19 Waiver Form.¹

This completed form **must be filed electronically** mailed to Larry.Carbonneau@maine.gov and Marcia.Smith@maine.gov prior to the implementation of a proposed bed increase.

Please complete the following:

Provider Name	Northern Light Blue Hill Hospital
Current Licensed Bed Capacity	25
Proposed Licensed Bed Capacity	72
Date for Implementation of Increased Bed Capacity	4-10-2020
Description of Where Beds will be Located and How They Will Be Used	<p>Intensive care: (to be used as intensive care beds)</p> <ul style="list-style-type: none">• Emergency Room 7 <p>Medical surgical services: (to be used as med-surg beds)</p> <ul style="list-style-type: none">• Endoscopy 1• Room 8 2• Pre-Op 5• Operating rooms 2• Medical office building (on campus)30
Identification of Service(s) and Service Location(s) that will be Temporarily Suspended In Order to Diagnose and Treat COVID-19 Patients. (If applicable)	Services are not being suspended, however, elective and non-essential procedures have been postponed and rescheduled if possible. Some services are being provided via telemedicine as appropriate.

¹ Increases in licensed bed capacity or the suspension of service(s) by a hospital that are triggered by the COVID-19 pandemic shall only be effective during the pendency of the public health emergency declared by Governor Janet T. Mills on March 18, 2020. Thereafter, any Hospital wishing to retain the additional licensed beds or any change normally requiring a CON, must file a CON application consistent with the established statutory and regulatory CON requirements.

Person completing the form: John Ronan

<u>John Ronan</u>	<u>President</u>
Name	Title

57 Water Street
Address

Blue Hill, ME 04614
Address

(207) 374-3410 or (207) 356-1593
Telephone

ironan@northernlight.org
Email address



_____, <u>04/13/20</u>	
Signature	Date

Cc: Jean Mellett